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25 June 2004

Center for Disease Control and Prevention
Re: Proposed CDC guidelines on HIV prevention

I am alarmed at the news that the CDC has proposed new HIV prevention guidelines that will require abstinence-only programs, will effectively eliminate any discussion of condoms, and will censor the content of related materials. I believe these proposed guidelines will cripple the HIV prevention efforts of our agency and of AIDS service organizations throughout the country.

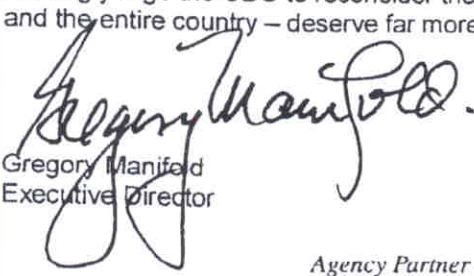
Agencies like ours, on the front lines of HIV prevention efforts, know from day to day the reality of our own communities. What makes our organization effective is a full range of resources available to meet the needs of distinct populations. In some cases, the abstinence-only approach may be effective. But, in most cases, multiple approaches are required. With sexually active youth and adults, the HIV prevention message is far more likely to save lives if abstinence is one of several methods discussed. The reality of our community is that our agency will soon become ineffective in preventing HIV infection if we are restricted to abstinence-only education.

The AIDS Task Force has been doing this work in northeast Indiana since 1985. During these nearly 20 years, we have never shied away from the real life situations we have identified in our community. I find it staggering to believe that the CDC would think it appropriate to limit rather than expand the arsenal of resources available to those of us working in HIV prevention. With today's complacent attitude toward HIV and AIDS, we need to confront a new generation with more not fewer options to prevent infection. Young people who did not live through the first 15 years of this epidemic do not appreciate the toll it will take on their lives and their communities if they are infected. Preparing them to be safe in whatever situations they encounter is critical to our ability to reduce the number of new infections in northeast Indiana.

We are a nation of people who choose different paths in response to the same situation. This is and has always been our strength. To expect that HIV prevention methods ought to rely on the single path of abstinence is to fly in the face of our national heritage of individuality.

To limit what is acceptable HIV prevention to one choice is also to sacrifice the lives and future contributions of countless fellow citizens who, for whatever reason, will not respond to the abstinence-only message. To send our agency's prevention staff into the reality of 21st century northeast Indiana bearing only the abstinence message is to consign a host of sexually active young people and adults to potential HIV infection and, ultimately, to the debilitation of AIDS. It would be unconscionable to reject our neighbors in this way.

I strongly urge the CDC to reconsider these deadly new guidelines. Northeast Indiana citizens – and the entire country – deserve far more respect.


Gregory Manifold
Executive Director

Agency Partner of the United Way of Allen County

